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	Application Number	09/777,032							
TRANSMITTAL	Filing Date	02/05/2001 Stephen A. BAGSHAW							
FORM	First Named Inventor								
	Art Unit	2134							
(to be used for all correspondence after initial filing	Examiner Name	HENEGHAN, Matthew							
Total Number of Pages in This Submission 58	Attorney Docket Number	1376-0100030							
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ENCLOSURES (Check all that apply)									
Document(s)	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund  CD, Number of CD(s)  Landscape Table on CD  Remarks  USTOMER NO.: 34456	ddress Status Letter Other Enclosure(s) (please Identify below):							
SIGNATU	RE OF APPLICANT, ATTO	RNEY, OR AGENT							
TOLER, LARSON & AB	BEL, LLP								
Signature									
Printed name Ryan S. Davidson									
Date 5 Agust 2	2005 F	Seg. No. 51,596							
CER	TIFICATE OF TRANSMISSI	ON/MAILING  Our deposited with the United States Postal Service with Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on							
Signature Signature									
Typed or printed name Judy Carey	<del>.</del>	Date 845 05							

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818		_	Application Nur	mber 09	/777,032					
FEE TRANSMITTAL For FY 2005		\L	Filing Date	ng Date 02/05/2001						
			First Named Inv	entor Ste	Stephen A. BAGSHAW					
Applicant eleime amell antity status. See 27 CER 1 27			7	Examiner Name	e HE	HENEGHAN, Matthew				
Applicant claims small entity status. See 37 CFR 1.27			.,	Art Unit		2134				
TOTAL AMOUNT OF PAYMENT (\$) 180.00				Attorney Docke	t No. 13	1376-0100030				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):    X   Deposit Account   Deposit Account   Number: 50-0441   Deposit Account   Name: ATI Technologies, Inc.   For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION										
1. BASIC FILING, SEARC	FILING F			RCH FEES Small Entity Fee (\$)	EXAMINAT Sr Fee (\$)	ION FEES nall Entity Fee (\$)	Fees P	<u>aid (\$)</u>		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0		<del></del>		
2. EXCESS CLAIM FEES Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)										
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SUBMITTED BY				Registration No.		T-1:-1	-40 OC-	7.554.5		
Signature	- 2	1	ĺ	(Attorney/Agent)	51,596	l elephone	512-327	7-5515		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type)

Ryan S. Davidson